	NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFEREN	Decket Number (Optional) 001508-3220			
	CERTIFICATE OF MAILING OR TRANSMISSION [37 CFR 1.89(a)]	In re Application of Eric Allan BIER			
I hereby certify that this correspondence is being deposited with the United States Poxal Service with sufficient postage for first class mail in an envelope addressed to Mall 850 pA f. Commissions for Pleastrs P.O. Box 1450. Alexandria. Virginis 22313-1450, or being facsimile transmitted to the USPTO at 1		Application Number 69/731,912		Filed December 8, 2000	
		For SYSTEMS AND METHODS FOR EDITING A WEB PAGE			
Signature:		Group Art Unit 2176		Examiner Chau T. Nguyen	
Name:				and the second	
Appl exam	icant hereby appeals to the Board of Patent Appea tiner.	als and Interfe	erences	from the dec	ision of the
The f	fee for this Notice of Appeal is (37 CFR 41.20(b)(1))			\$510.00
	Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is:				
	A check in the amount of the fee is enclosed.				
□ F	Payment by credit card. Form PTO-2038 is attached.				
	The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.				
а	The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. 24-0037. I have enclosed a duplicate copy of this sheet.				
	A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.				
	WARNING: Information on this form may bec be included on this form. Provide credit card in				
I am	the				
Ε	applicant/inventor.	***********	Signature		
	 assignee of record of the entire interest. See 3: 3.71. Statement under 37 CFR 3.73(b) is enclor (Form PTO/SB/96) 				
[2	attorney or agent of record			A. Pryor, R	eg. #48,103/
	attorney or agent acting under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a)				April 18, 2008

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forms are submitted.

□ *Total of